

Work Order ID 88979

August-14-12 7:33:56 AM

88979

Page 1

Item ID: D407-667-105TRN

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Turning Detail

Start Date: 14/08/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 28/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12/08/14 Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D407-667-145	Rev C
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100

0.00

100

MORI SEIKI CNC LATHE LARGE

Mori Seiki

Memo

0.00

Mori Seiki CNC Lathe Large

1-Fill tube with sand & install plugs DT8673 on both ends as per Folio FA249

2-Turn first side as per Folio FA249

3-Blend transition lines only, **do not sand whole tube**

FOLIO REV: AA

DWG REV: C

*Use mill bastard file, brush file repeatedly with file card.

*Do not use sandpaper coarser than 320 grit.

1 φ KC 12-8-19

110

QC1- Inspect dimensions to dimension sheet

0.00

110

QC

Memo

0.00

Quality Control

1 φ KC 12-8-19

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: AK Date: 12/09/15QA Closed: ck Date: 12/9/20

Work Order: <u>88979</u>	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input checked="" type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. <u>D407-667-105TRN</u>		Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input checked="" type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
NCR No. <u>12-1805</u>					

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>	<u>12/9/14</u>	<u>100</u>	<u>1</u>	<u>Tube is 0.003" UNDER</u> <u>in 1 place, 0.002" UNDER</u> <u>in another, AND BOTH</u> <u>Cuffs are OVER by 0.003"</u> <u>φ1.973 DIM IS φ1.977.</u> <u>RC MATERIAL</u>	<u>DAS</u> <u>12/9/14</u>	<u>Acceptable</u>	<u>DAS</u> <u>12/9/14</u>	<u>JW</u> <u>12/9/14</u>	<u>DAS</u> <u>12/9/14</u>
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input checked="" type="checkbox"/> Other
		<u>MATERIAL HAD OVALITY</u> <u>FROM SUPPLIER.</u>

Work Order ID 88979

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August-14-12 7:33:56 AM

Item ID: D407-667-105TRN

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Turning Detail

Start Date: 14/08/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 28/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	MORI SEIKI CNC LATHE LARGE	0.00							
120									
Mori Seiki	Memo	0.00							
Mori Seiki CNC Lathe Large	1-Turn second side as per Folio FA249								
	2-Blend transition lines only, **do not sand whole tube**: *Use mill bastard file, brush file repeatedly with file card. *Do not use sandpaper coarser than 320 grit. FOLIO REV: <u>AA</u> DWG REV: <u>C</u> 3-Remove sand and plugs								
	4-Scribe part # and batch # using vibrating stylus as per Dwg D206-667-145 inside of Cuff(Do not engrave on outside of tube)								
130	QC1- Inspect dimensions to dimension sheet	0.00							
130									
QC	Memo	0.00							
Quality Control									

1 φ KC 12-8-19

1 φ KC 12-8-19

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____	

Work Order ID 88979

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Item ID: D407-667-105TRN

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: Crosstube Turning Detail

Stop ***NS2***

Start Date: 14/08/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 28/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	QC8- Inspect parts - second check	0.00							
140									
QC	Memo	0.00							
Quality Control									
145		0.00							
145									
Crosstubes	Memo	0.00							
Crosstubes	GRIND ONLY TRANSITION LINES SMOOTH LONGITUDE WAY.								
150		0.00							
150									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	1- PRESSURE WASH X-TUBE INSIDE AND OUT								
	2- ACID ETCH X-TUBE INSIDE AND OUT. USE RED SCOTCH BRITE								

JW *12-9-5*

JW *12-9-13*

CF *12-9-13*

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 88979

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Item ID: D407-667-105TRN

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Turning Detail

Start Date: 14/08/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 28/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160	QC5- Inspect part completeness to step on W/O	0.00							
160									
QC	Memo	0.00							
Quality Control									
170	Packaging	0.00							
170									
Packaging	Memo	0.00							
Packaging	Identify and stock in Kanban rackLocation: <u>LG</u>								
180	QC21- Final Inspection - Work Order Release	0.00							
180									
QC	Memo	0.00							
Quality Control									

DAS
03
9-89
12-9-13

RM 12-9-13

12/9/14
MF
12-09-13

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

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Page 1

Work Order ID: 88979

88979

Parent Item: D407-667-105TRN

D407-667-105TRN

Parent Item Name: Crosstube Turning Detail

Start Date: 14/08/2012

Required Date: 28/08/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:a08.02.28 new issueEC
IPP Rev B 08.04.02 Removed polish EC verified by: DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D6010-115		Manufactured	No			110	Each	29.0000	1	1			

D6010-115

**

Crosstube Material

Location

Loc Qty

Loc Code

LG

29

38343

11

69839

18

mml 12/08/16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

DART AEROSPACE LTD	Work Order:	88979
Description: Crosstube Assembly	Part Number:	D407-667-145
Inspection Dwg: D407-667-145 Rev: C		Page 1 of 2

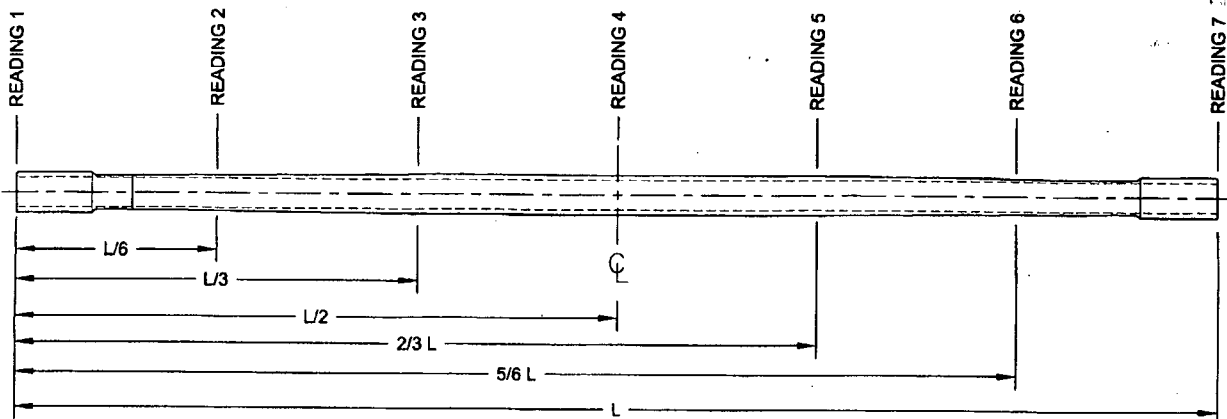
FIRST ARTICLE INSPECTION CHECKLIST

	Inspection Sheet Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
SIDE A	2.240	+0.005/-0.000	2.245	✓		VERN	CNC-08
	1.865	+0.005/-0.000	1.865				
	1.878	+0.005/-0.000	1.877		✓		
	1.970	+0.005/-0.000	1.970	✓			
	2.030	+0.005/-0.000	2.032	✓			
	2.165	+0.005/-0.000	2.169	✓			
	0.125	+/-0.010	.125	✓		VERN	CNC-08
	R0.063	+/-0.010	.063	✓		RG	—
	R0.500	+/-0.010	.500	✓		RG	—
	R0.063	+/-0.010	.063	✓		RG	—
	4.438	+/-0.030	4.448	✓		VERN	CNC-08
SIDE B	2.240	+0.005/-0.000	2.245	✓		VERN	CNC-08
	1.865	+0.005/-0.000	1.869	✓			
	1.878	+0.005/-0.000	1.883	✓			
	1.970	+0.005/-0.000	1.975	✓			
	2.030	+0.005/-0.000	2.035	✓			
	2.165	+0.005/-0.000	2.169	✓			
	0.125	+/-0.010	.125	✓		VERN	CNC-08
	R0.063	+/-0.010	.063	✓		RG	—
	R0.500	+/-0.010	.500	✓		RG	—
	R0.063	+/-0.010	.063	✓		RG	—
	4.438	+/-0.030	4.445	✓		VERN	CNC-08
	113.20	+/-0.020	113.20	✓		TAPE	LG-22

OK
CP
12/9/4

DART AEROSPACE LTD		Work Order:	88979
Description: Crosstube Assembly		Part Number:	D407-667-145
Inspection Dwg: D407-667-145 Rev: C		Page 2 of 2	

WALL THICKNESS MEASUREMENT



Location	WALL THICKNESS MEASUREMENT (IN)				Deviation Δw (max-min)	TOLERANCE
	w1	w2	w3	w4		
READING 1 L= 0"	.331	.335	.316	.312	.023	0.042"
READING 2 L= 13	.164	.170	.149	.146	-.024	
READING 3 L= 28	.231	.234	.221	.215	.019	
READING 4 L= 56	.332	.334	.317	.314	.020	
READING 5 L= 28	.242	.239	.216	.217	-.026	
READING 6 L= 13	.166	.159	.144	.149	.022	
READING 7 L= cuff	.329	.329	.318	.317	.012	

Calibration Result

Actual Block Thickness: _____

Sitescan 250 Measured Thickness: _____

Measured by:	gmmc
Date:	12/08/22

Audited by:	JW
Date:	12-9-5

Preliminary Approval:	
Date:	

Rev	Date	Change	Revised by	Approved
A	04.04.21	New Issue (P/O D407-667-105)	KJ/RF	
B	06.03.09	Dwg Rev updated	KJ/JLM	
C	09.06.11	Dwg Rev updated	KJ	
D	11.06.21	Tolerance revised for 4.438 dimension	KJ	
E	12.06.04	Wall thickness form added	KJ	

Item	Qty -145	Part Number	Description
1	X	D407-667-145	CROSSTUBE ASSEMBLY (407 HIGH FWD)
2	1	D6010-115	CROSSTUBE
3	2	D2873-043	NUT PLATE
4	2	D2873-045	NUT PLATE
5	2	D2891-1	SUPPORT
6	4	D3595-063-395	RUBBER CUSHION
7	4	MS21920-20	CLAMP (OR MS21920-21)
8	14	MS20601AD4W10	RIVET (OR NAS9302B-4-10)
9	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299- 947-100, TYPE II, CLASS 2 ADHESIVE)

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6010-115
FINISHED LENGTH = 113.20±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D407-667-145" AND BATCH NUMBER ON
INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: 17.8 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART WHERE INDICATED. BLEND OUT EDGE LONGITUDINALLY,
TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 6 PASSES. MAXIMUM TUBE FLATTENING DUE
TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2891-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER
QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-20 CLAMPS (OR -21) WITH D3595-063-395 RUBBER CUSHIONS TO SECURE
THE D2891-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMP MECHANISMS
ARE LOCATED ON CROSSTUBE SUPPORTS.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE
OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS
SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT
LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN.-LB. ENSURE AT LEAST 1.5 THREADS ARE SHOWING IN
SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 88979 MLJ
12/08/14

DEO ATTACHED

ECW#11-615
11.07.26

UNDER REVIEW
08/11/12

RELEASED
08/11/12

C	REVISE GENERAL NOTES/PART LIST (ZN D7-1); REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS. D3595-063-395 WAS D2856-400-694 (ZN D6-2 & A5-2); REMOVED REF. 7 ADD TOLERANCES (ZN C6-3, C4-3, D2-3); RELOCATED FLAG #6 (ZN A8-3) PER NCR 210; MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4.	RF.	08.11.06
B	ADD HOLES AND NUT PLATES FOR COMPATABILITY WITH BHT/AA SKUDTUBES	PH	05.07.26
A	NEW ISSUE	CP	02.05.08
REV.	DESCRIPTION	BY	DATE
DESIGN	<u>q</u>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	<u>RF</u>	DRAWING NO. <u>D407-667-145</u> REV. C SHEET 1 OF 4	
CHECKED	<u>q</u>	TITLE <u>CROSSTUBE ASS'Y (407 HIGH FWD)</u> SCALE <u>NTS</u>	
MFG. APPR.	<u>q</u>	DATE <u>08.11.06</u>	
APPROVED	<u>q</u>	COPYRIGHT © 2002 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	
DE APPR.	<u>q</u>		

8 7 6 5 4 3 2 1

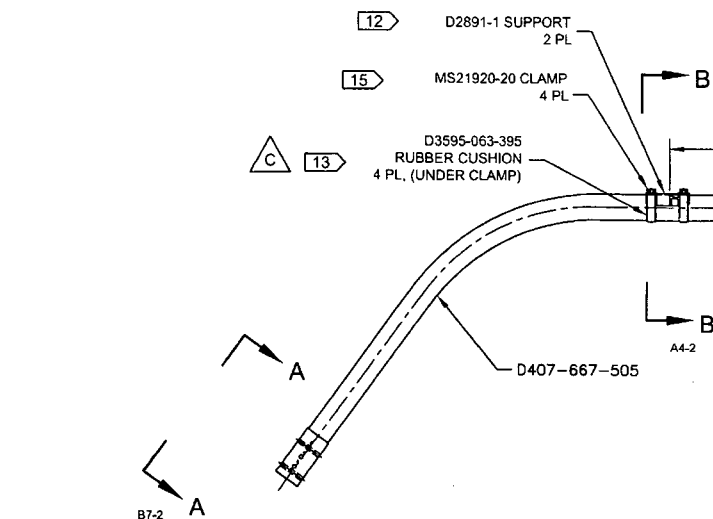
88979

ECW #11.615
11.07.26

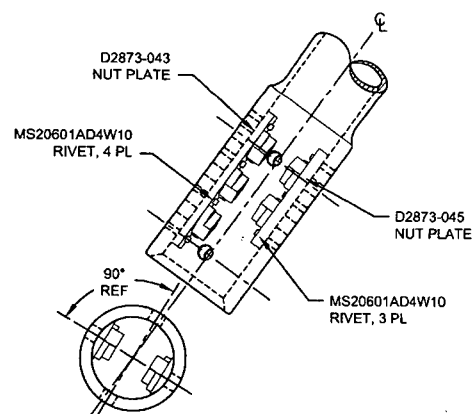
UNDER REVIEW
9/1/06

RELEASE
08/11/2006

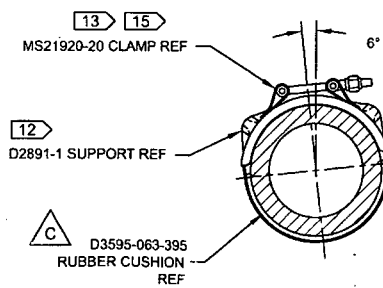
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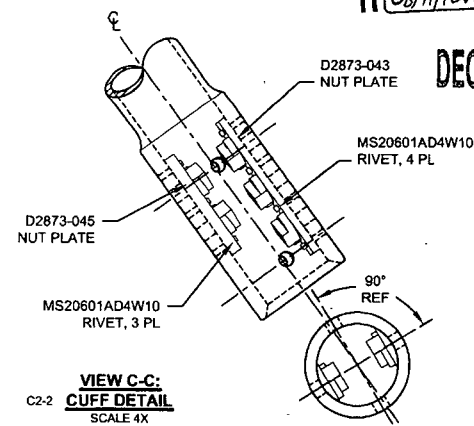
**D407-667-145
ASSEMBLY DETAIL**
(VIEW LOOKING FWD)



**VIEW A-A:
CUFF DETAIL**
SCALE 4X



SECTION B-B
SCALE 5X



**VIEW C-C:
CUFF DETAIL**
SCALE 4X

DESIGN	90	DART AEROSPACE LTD
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA
CHECKED	90	DRAWING NO. REV. C
MFG. APPR.	90	D407-667-145 SHEET 2 OF 4
APPROVED	90	TITLE SCALE
DE APPR.	90	CROSSTUBE ASS'Y (407 HIGH FWD) NTS
DATE	08.11.06	COPYRIGHT © 2002 BY DART AEROSPACE LTD

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UNDER REVIEW

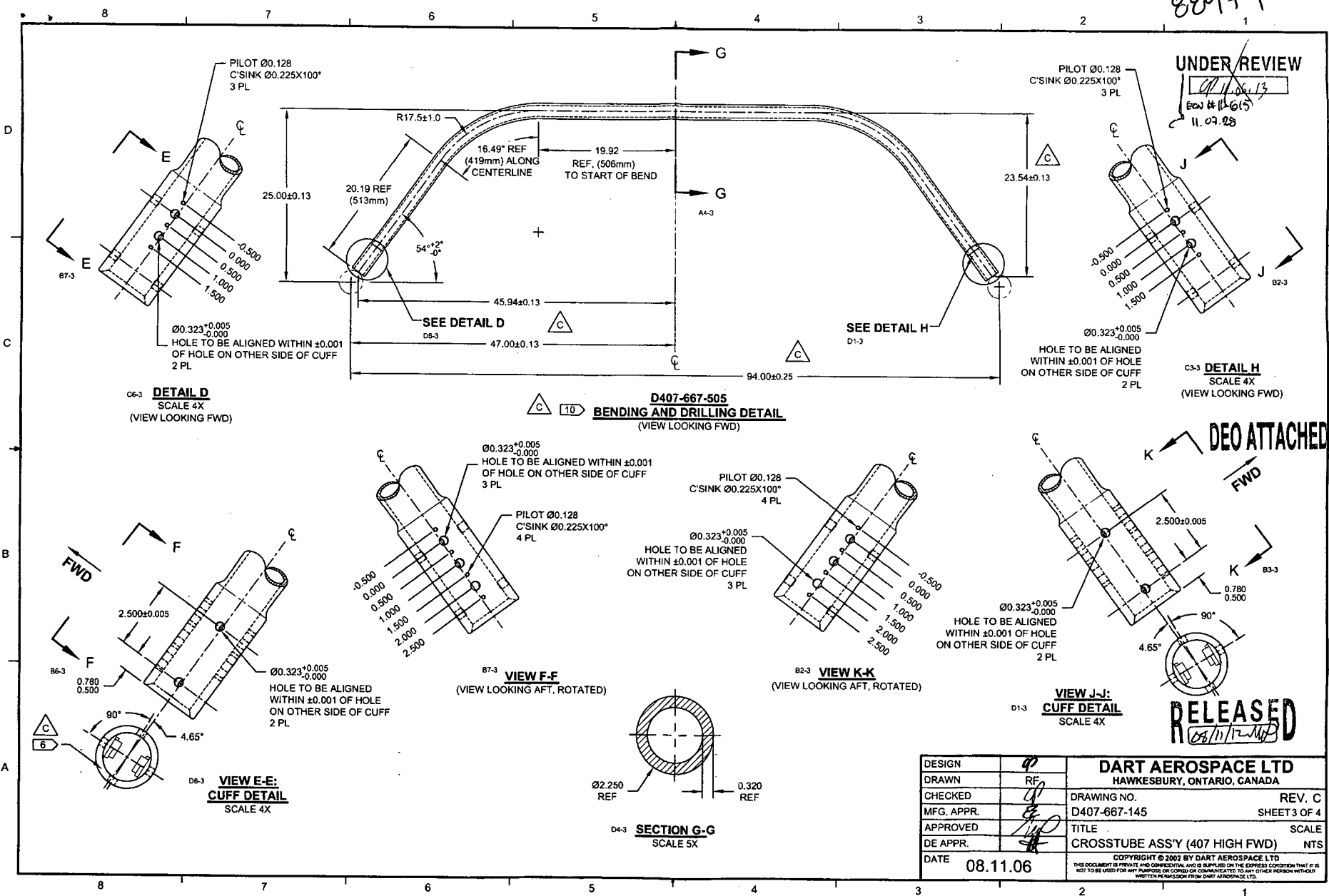
11.07.08

C3-3 **DETAIL H**
SCALE 4X
(VIEW LOOKING FWD)

DEO ATTACHED

RELEASED

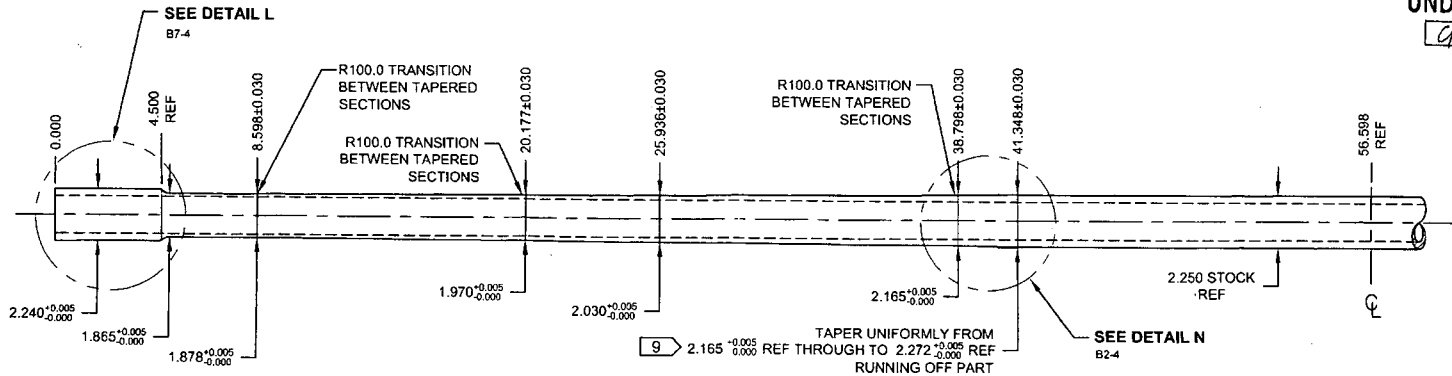
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DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	47	DRAWING NO.	REV. C
MFG. APPR.	47	D407-667-145	SHEET 3 OF 4
APPROVED	47	TITLE	SCALE
DE APPR.	47	CROSSTUBE ASS'Y (407 HIGH FWD)	NTS
DATE	08.11.06	COPYRIGHT © 2002 BY DART AEROSPACE LTD	
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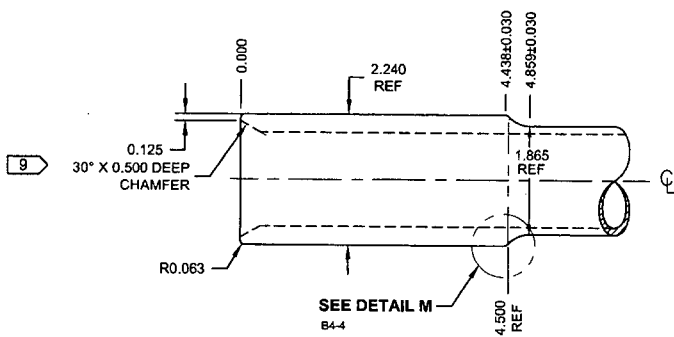
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UNDER REVIEW

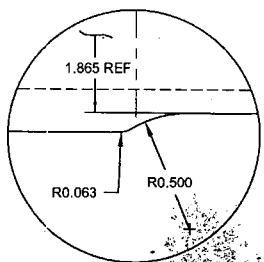
08/11/06
601 H11.615
11.07.26



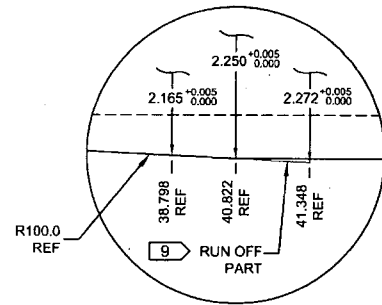
TURNING DETAIL



**DETAIL L:
CROSSTUBE CUFF**
NOT TO SCALE



**DETAIL M:
CUFF TRANSITION**
NOT TO SCALE



**DETAIL N:
TAPER RUN-OFF**
NOT TO SCALE

DEO ATTACHED

RELEASED
08/11/06

DESIGN	9	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	9	DRAWING NO.	REV. C
MFG. APPR.	9	D407-667-145	SHEET 4 OF 4
APPROVED	9	TITLE	SCALE
DE APPR.	9	CROSSTUBE ASS'Y (407 HIGH FWD)	NTS
DATE	08.11.06	<small>COPYRIGHT © 2002 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

88979

DRAWING NO. D407-667-145	TITLE CROSSTUBE ASS'Y (407 HIGH FWD)	REV. C	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D407-667-145-C-1	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN 9	CHECKED ASS	MFG. APPR. IB	APPROVED WD		DE APPR. H		
DATE 11.07.15	DATE 11.07.22	DATE 11.07.22	DATE 11/07/22		DATE 11.07.21		

PURPOSE:

REPLACE MAGNOBOND WITH PROSEAL.

CHANGE:**IS:**

Item	Qty -145	Part Number	Description
9	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

9	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
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NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) TO INSTALL D2891-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

- 12) INSTALL D2891-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASED
2011-07-28
WD